STATE OF CALIFORNIA

SELLER OF TRAVEL ATTESTATION



CST#:

- I, the undersigned, declare as follows:
- 1. I am a registered seller of travel, having previously filed with the office of the California Attorney General, a complete, true and correct registration statement, as required by section 17550.21 of the California Business and Professions Code.
- 2. I am aware that the California Business and Professions Code section 17550.21(h) requires sellers of travel to permit the office of the Attorney General to obtain financial information concerning the seller of travel and I am aware that my prior filing provides:

Each filing pursuant to Section 17550.20 shall contain the following information:

. . .

(h) A statement signed by each owner and principal granting permission to the office of the Attorney General to obtain from any financial institution or credit union at which any trust account required by Section 17550.15 is maintained, information relating to that trust account, as set forth in paragraph (2) of subdivision (f) of Section 17550.15.

The prior permission granted to the office of the Attorney General of the State of California, pursuant to California Business and Professions Code section 17550.21(h), has not expired and is still in effect.

- 3. I attest to the continued accuracy of the information in the last filed completed registration statement.
- 4. As required by California Business and Professions Code section 17550.21(k), each owner and principal of the seller of travel, or in the case of corporations specified in section 17550.21(k), a duly authorized officer of the corporation, has read, understood and signed this Attestation.

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Print busin	ness name and each dba used	d by this Seller of Travel:	
PRINCIPAL PI	LACE OF BUSINESS		
DBA(s)			
	NIA THAT ALL OF THE INF	OF PERJURY UNDER THE LAWS OF THE STATE OF FORMATION PROVIDED ON THE ATTESTATION IS TR	UE.
1.	Date	Signature	
	City, County and State	Name Printed	
2.	Date	Signature	
	City, County and State	Name Printed	
3.			
	City, County and State	Signature Name Printed	
4.			
	Date	Signature	

Use additional pages, as necessary.

Name Printed



City, County and State

SELLER OF TRAVEL ATTESTATION

CST#:

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-	Date	Signature
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	City, County and State	Name Printed
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Use additional pages, as necessary.